

QUALITY IMPROVEMENT PROJECT (QIP)

Grant Year 2019

Project Description

The Virginia Ryan White Quality Management Advisory Committee (QMAC) selects a statewide Quality Improvement Project (QIP) as a way to improve systems and processes of care in which they practice. Through the QIP, quality improvement tools and methods are applied. For Grant Year 2019, the QIP chosen topic is **Viral Load Suppression**, (VLS), which entails action steps for integrating change into routine activities. Improving VLS has implications for improving health outcomes and decreasing the risk of transmitting the virus to others.

Subrecipients solely providing services such as outreach, early intervention services, legal services, and others as noted by VDH will focus their QIP on improving the HIV Linkage to care services and measures. Virginia Department of Health (VDH) will contact these sites individually.

Viral load monitoring offers a number of benefits to patients on Anti-Retroviral Treatment (ART), including:

1. Timely indication of the need for adherence support;
2. Early detection of the possibility of developing drug-resistant mutations;
3. Detection of clients at increased risk for opportunistic infections;
4. Guiding timely decisions for switching to a more appropriate treatment regimen if treatment failure is confirmed.

In addition, a suppressed viral load in people living with HIV (PLWH) prevents disease progression, and helps them live longer, healthier lives. They effectively have no risk of sexually transmitting HIV to their HIV-negative partners.

The key principle in this improvement project is based on the improvement model known as Plan, Do, Study, and Act (PDSA), which includes measuring, testing change, re-measuring, and the application of a new change.

The QIP Reporting template is based on this improvement model and each component of the Plan, Do, Study and Act are captured in the document.

Background:

Ryan White HIV/AIDS Program (RWHAP) Part B base award directly funds service providers throughout the five health regions of the state, and includes the Minority AIDS Initiatives (MAI) and Emerging Communities (EC) funds. Funded services provide core and support services to improve early linkage to care, retention in care, and viral suppression for low-income HIV-positive clients. In addition, RWHAP Part B provides funding for HIV medication access through the Virginia AIDS Drug Assistance Program (ADAP).

A VDH baseline assessment for the state indicates an 81% Ryan White VLS rate for 2018. Thus, the Virginia Department of Health (VDH) identified VL monitoring as one of the focal areas for improvement, and will assist all subrecipients to integrate approaches to improve their VLS performance measure to 90% by the end of the 2019 Ryan White grant year.¹ Virginia's QMAC will meet on a quarterly basis to review progress and will provide recommended changes that sites can test to attain improved VLS rate. VDH will also provide technical assistance as requested to the sites.

Documentation Requirements:

Staff and consumer involvement in the QIP should be well defined and identify support available to sustain selected interventions.

Baseline:

As of February 2019, the statewide Viral Load Suppression rate is 81%.

Projected Goals:

Contribution to increase statewide Viral Load Suppression rate from 81% to 90% by the end of the March 31, 2020. Subrecipients' goals should be reflective of their agency's current baseline data and may require a different projected achievement rate.

Performance Measurement²:

The use of data in analyzing and understanding characteristics of PLWH who are not virally suppressed to tailor QI efforts, and to measure improvement will be considered. Cross-reference your internal data with VDH provided quarterly data and fill in any gaps to ensure proper follow-up actions.

The QIP will provide opportunities to:

- Allow participating funded agencies to align their own continuous improvement initiatives and projects with the statewide required QIP processes;
- Set a routine schedule for monitoring and reviewing viral load data;
- Educate staff, agencies, and clients about quality improvement activities and provide them with the skills to participate in Ryan White improvement processes; and
- Share results from improvement projects with agency staff, VDH and others.

Scope

We propose that each funded agency will:

1. Develop efficient methods of monitoring and improving viral load suppression status;
2. Assess the degree to which funded agencies that participate in the QIP achieve greater improvement; and

¹ An amended QIP guidance will be provided for the following identified agencies: Daily Planet, Nova Salud, and Richmond City Health District.

² Agencies identified for an amended QIP will focus on Linkage to Care performance measure for Grant Year 2019 QIP.

3. Conduct and report descriptive analyses of improvement processes that are associated with sustained change through VDH required reporting processes and template.

QI Teams

A quality improvement team including clinical providers, data managers, consumers and administrators, should be established within each funded agency to manage the QIP process:

- QI team develops and executes a detailed plan on how the QIP activities should be implemented at the site; and
- Agency's leaders are encouraged to play a key role by creating a culture that supports quality improvement.

QI Team responsibilities

- Develop and implement the selected QIP;
- Collect data and analyze results on regular basis to address and identify gaps;
- Use PDSA tools and continually measure, whether those changes actually produce the improvements in service delivery as expected; and
- Report to VDH on quarterly basis.

Project Period

Timeline is from April 1, 2019 to March 31, 2020.

Data Collecting

We define a care marker as evidence of a HIV medical care visit date, a CD4 count and test date, a viral load value and test date, and/or an antiretroviral medication prescription and date.

Baseline Data

- Use agency internal data and VDH data provided to help identify specific gaps and needs
- Analyze the data to create the background of your proposed project
 - Define problem statement on what issues are presented by your agency data
 - Define Specific, Measurable, Achievable, Relevant and Time Bound (S.M.A.R.T.) goals and objectives for the QIP
 - Provide aim statement of the QIP
 - Identify team members with assigned tasks in the QIP and necessary tools for the project
 - Understand the performance measures and their indicators (numerator, denominator, etc.)

Quarterly Data

- Use VDH provided data as well as data pulled from your internal data system to help identify current gaps that need to be addressed
- A data analysis plan should be developed including:
 - What data will be collected?

- How the data will be collected and recorded?
- At what frequency (how often) the data will be collected?
- Where do gaps in performance exist, and why do they exist?
- What actions can be done to improve the results?
- Submit quarterly report to VDH using the approved QIP reporting template for the current grant year.

Communicating & Tracking Results

In addition to the statewide communication resources, results of QIP findings should be presented to the agency quality committees, leadership and staff. Findings should be used for future planning and improvement activities at least on monthly basis.

The areas of change processes for improvement may involve but are not limited to:

- Client and family education and engagement
- Healthcare worker capacity building
- VL results tracking and documentation (monitor VL patient's care)
- Set up agreement with clinical facility to share electronic VL test results
- Conduct weekly/monthly reviews for VL data quality
- Offer peer-led support groups tailored for specific patient populations

The areas of change processes should be used to create change steps. Tracking your change steps help to identify what improved your data and services. It will help what further actions you can take to continue improvement versus what steps should not be continued. In addition to knowing what actions improved your data, you are also able to form best practices and share successes.

Technical Assistance

If you are in need of technical assistance, you have many options available. Contact members of the QMAC or other agencies for opportunities to share their successful strategies and experience that may work in your agency. Also, please feel free to contact Safere Diawara, Quality Management Coordinator via email or phone at Safere.Diawara@vdh.virginia.gov and (804) 864-8021 or Jonathan Albright, Quality Management Specialist at Jonathan.Albright@vdh.virginia.gov (804) 864-7951.

Below you will find a list of online resources in which you can use to help your agency with the QIP.

- **QI Resources** (CQII formerly the Nation Quality Center): <http://nationalqualitycenter.org/quality-improvement-resources/>
- **QIP Reporting Guidance and Template** (VDH Webpage under Quality Management): <http://www.vdh.virginia.gov/disease-prevention/disease-prevention/hiv-care-services/>
- **SMART Goals Tips:** <https://notejoy.com/resources/smart-goals-definition>